

State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

assistance in completing this form, see instructions on the reverse side.

JmBelden -

(CFA-4)

Summary Sheet FILE NUMBER

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For

TOTAL PAGES IN ENTIRE CFA-4 REPORT

COMMITTEE INFORMATION I. Full Name of Committee (as on Statement of Organization)	IS THIS AN AMENDMENT? Yes	PNo HAMILTON C.		10	
1. Full Name of Committee (as on Statement of Organization)					
3. Committee Telephone Number 2. Acromyn of Abbreviated Name (if any) 3. Committee Telephone Number 3. S. Detect Name (if any) 4. Mailing Address (address swhere all campaign finance correspondence is received) 3. S. W. J. L. Sect. N. State, IZP Code 4. Mailing Address (address swhere all campaign finance correspondence is received) 3. S. W. J. L. Sect. N. State, IZP Code 4. Party Affiliation (if applicable) 4. Mailing Address (address swhere all campaign finance correspondence is received) 3. S. Party Affiliation (if applicable) 4. Mailing Address (include any nickname) 4. Party Affiliation (if applicable) 5. Party Affiliation (if applicable) 4. Party Affiliation (if applicable) 5. Party Affiliation (if applicable) 6. Party Affiliation (if	1 Full Name of Committee (as on Statement of Organization		name		
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Pre-Primary Pre-Election Annual Nomination Other	TYPE OF F	REPORT		CONVENTIO	N CANDIDATES ONLY
Final/Disbands Committee (lines 18, 19, and 20 must be '0') Outgoing Treasurer (within 10 days amend Statement of Cryanization) 12. Reporting Period: From: / - / _				Check one:	
12. Reporting Period: From: / - / Through: / Z - 3/ - / This Period 13. Cash on hand and investments at the beginning of this reporting period. 14. Cash on hand and investments January 1, current year. CONTRIBUTIONS AND RECEIPTS (Note: these amounts include in-kind contributions and loans, as well as cash contributions.) 15a. Itemized (use Schedule A) 15b. Unitemized 15c. Add lines 15a and 15b in both columns SUBTOTAL 15c. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B TOTAL 16c. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B EXPENDITURES (Note: These amounts include in-kind expenditures and loan repayments.) 17a. Itemized (use Schedule B) (Public Question: use Schedule C) 17b. Unitemized 17c. Add lines 17a and 17b in both columns SUBTOTAL 17d. Add	Pre-Primary Pre-Election Annual Nomination	Other		Pre-Conv	vention
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4) and may be subject to civil penalties. (IC 3-9-4-17, IC 3-9-4-18)					



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

FILE NUMBER				
Page	2	of	10	

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE RECEIVED
(street, number, city, state, ZIP code)	OR OTHER RECEIPT	PERIOD	YEAR-TO-DATE	RECEIVED BY
1.	Contributions:			
	Direct			
	In-Kind (describe)			
	Other Receipts: Interest Loan			
	Misc. (specify)			
Contributor's Occupation (if required)				
2.	Contributions:			
-	Direct			
	☐ In-Kind (describe)			
	Other Receipts:			
	Interest Loan			
	Misc. (specify)			
Contributor's Occupation (if required)	<u> </u>			
3.	Contributions:			
	Direct			
	In-Kind (describe)			
	Other Receipts:			
	Interest Loan			
	Misc. (specify)			
Combridade Occuration (if consider				
Contributor's Occupation (if required)	Contributions:			
•	Direct			
	In-Kind (describe)			
	Other Receipts:			
	Interest Loan			
	☐ Misc. (specify)			
Contributor's Occupation (if required)				
5.	Contributions:			
	In-Kind (describe)			
	in-Killa (acconsc)			
	Other Receipts:			
	Interest Loan			
	Misc. (specify)			
Contributor's Occupation (if required)				
	THIS PAGE OF SCHEDULE A	\$		
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(Enter total on ITE	M 15a of the Summary Sheet)	ı · —		



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

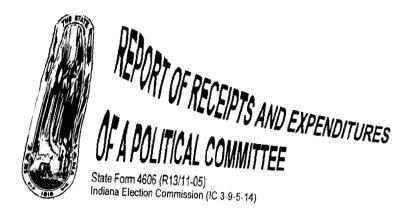
(CFA-4 SCHEDULE A-2) CONTRIBUTIONS BY CORPORATIONS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY CORPORATIONS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from corporations OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

FILE NUMBER				
Page	3	of _	10	

	CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS	COLUMN B	DATE RECEIVED
1.	(street, number, city, state, ZIP code)	Contributions: Direct In-Kind (describe)	PERIOD	YEAR-TO-DATE	RECEIVED BY
		Other Receipts: Interest Loan Misc. (specify)) /	
2.		Contributions: Direct In-Kind (describe)			
		Other Receipts: Interest Loan Misc. (specify)			
3.		Contributions: Direct In-Kind (describe)			
		Other Receipts: Interest Loan Misc. (specify)			
4.		Contributions: Direct In-Kind (describe)			
		Other Receipts: Interest Loan Misc. (specify)			
5.		Contributions: Direct In-Kind (describe)			
		Other Receipts: Interest Loan Misc. (specify)			
		THIS PAGE OF SCHEDULE A	200		
	TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITE	A ON THE LAST PAGE ONLY M 15a of the Summary Sheet)	\$0-		



(CFA-4 SCHEDULE A-3) CONTRIBUTIONS BY LABOR ORGANIZATIONS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY LABOR ORGANIZATIONS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from labor organizations OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

FILE NUMBER
Page 4 of 10

	CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1.		Contributions: Direct In-Kind (describe)	0		
		Other Receipts: Interest Loan Misc. (specify)			
2.		Contributions: Direct In-Kind (describe)	_		
		Other Receipts: Interest Loan Misc. (specify)	_		
3.		Contributions: Direct In-Kind (describe)			
		Other Receipts: Interest Loan Misc. (specify)	_		
4.		Contributions: Direct In-Kind (describe)			
		Other Receipts: Interest Loan Misc. (specify)			
5.		Contributions: Direct In-Kind (describe)			
		Other Receipts: Interest Loan Misc. (specify)			
	SUBTOTAL T	HIS PAGE OF SCHEDULE A	\$10-		
	- AGES OF SCHEDULE A	ON THE LAST PAGE ONLY 15a of the Summary Sheet)	\$-0-		
		- Julean	V		



(CFA-4 SCHEDULE A-4) CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from political action committees OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions regardless of amount from political action committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

FILE NUMBER				
Page _	5	of _	10	

MUST be itemized on this schedule (over \$200 if regular party committee).			ige or	
CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)	_0		
2.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
3.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
4.	Contributions: Direct In-Kind (describe)	-		
	Other Receipts: Interest Loan Misc. (specify)			
5.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
SUBTOTAL	THIS PAGE OF SCHEDULE A	5-0-		
TOTAL OF ALL PAGES OF SCHEDULE / (Enter total on ITE)	A ON THE LAST PAGE ONLY M 15a of the Summary Sheet)	\$-0-		



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-5) CONTRIBUTIONS BY OTHER ORGANIZATIONS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY ORGANIZATIONS OTHER THAN CORPORATIONS, LABOR ORGANIZATIONS, POLITICAL ACTION COMMITTEES AND INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from other entities OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions regardless of amount from candidate's, legislative caucus, and regular party committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

FILE NUMBER			
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Page _	b	of_[0	

party committee).			Page	01
CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)	_ (
2.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
3.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
4.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
5.	Contributions: Direct In-Kind (describe)			
	Other Receipts:			
SUBTOTAL	THIS PAGE OF SCHEDULE A	\$ -0 -		
TOTAL OF ALL PAGES OF SCHEDULE A (Enter total on ITE)	A ON THE LAST PAGE ONLY If 15a of the Summary Sheet)	\$ -0 -		



(CFA-4 SCHEDULE B)
ITEMIZED EXPENDITURES

State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities OVER \$100 per recipient, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) MUST be itemized on this schedule.

FILE NUMBER				
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				age	
RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
CARMEL FOUTBALL ALUMENS CHUMEN 41 FIRST ST. S.E. CARMELTA 46036	NOT-FOR-PAR	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:		220.00	2-15-11
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:		•	
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose;			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
	SUBTOTAL THIS PAC	GE OF SCHEDULF B	\$ 1 10 -2		
TOTAL OF ALL PA	AGES OF SCHEDULE B ON THI		\$ 220.00		
	(Enter total on ITEM 17a of		\$ 220,00		



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE C) ITEMIZED EXPENDITURES For Public Questions

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. All cumulative expenses or transfers-out, regardless of amount paid to political committees supporting or opposing a public question, MUST be itemized on this schedule.

FILE NUMBER					
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	PUBLIC QUESTIC	N INFORMATION			
Enter Text of Public Question					
Type of Question: Statewide	Local				
Position: Supported Oppos					
RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
Code		☐ Direct ☐ In-Kind	TENIOD	(EARTO DATE	
<u> </u>		☐ Payment of Debt☐ Returned Contribution			1
		Other		0 -	
		Purpose:			
Code _		Direct In-Kind			
Code		☐ Payment of Debt ☐ Returned Contribution			
		Other			
		Purpose:			
Code		☐ Direct ☐ In-Kind	-		
		☐ Payment of Debt☐ Returned Contribution			
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			_		
Code		☐ Direct ☐ In-Kind ☐ Payment of Debt			
		Returned Contribution			
		Other Purpose:			
		☐ Direct ☐ In-Kind			
Code		Payment of Debt			
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		Purpose:			
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		Payment of Debt Returned Contribution			
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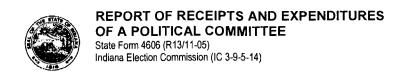
State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE D) DEBTS OWED BY THIS COMMITTEE

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, regardless of the amount, OWED BY the committee during the reporting period. Include all amounts owed for or to lend institutions, individuals, credit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the name of the committee in the ENDORSER'S column. A lender's occupation is required if an individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

FILE NUMBER				
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Page	9	of		

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CREDITOR'S OR LENDER'S NAME & MAILING ADDRESS	ENDORSER'S OR VENDOR'S NAME & MAILING ADDRESS (if any)	AMOUNT	DATE DEBT	CUMULATIVE PAID	OUTSTANDING BALANCE THIS
(street, number, city, state, ZIP code)	(street, number, city, state, ZIP code)	NATURE OF DEBT	INCURRED	YEAR-TO-DATE	PERIOD
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LENDER'S OCCUPATION:					
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LENDER'S OCCUPATION:					
SUBTOTAL THIS PAGE OF SCHEDULE D					\$ _ 0 -
	TOTAL OF ALL	PAGES OF SCHEDUL	E D ON THE LA	ST PAGE ONLY	
TOTAL OF ALL PAGES OF SCHEDULE D ON THE LAST PAGE ONLY (Enter total on ITEM 19 of the Summary Sheet)					\$ -0 -



(CFA-4 SCHEDULE E) DEBTS OWED TO THIS COMMITTEE

INSTRUCTIONS: Please type or print legibly **IN BLACK INK** all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, <u>regardless of the amount</u>, **OWED TO** the committee during the reporting period. Include all amounts the committee has loaned to others.

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BORROWER'S NAME & MAILING ADDRESS (street, number, city, state, ZIP code)	CO-SIGNER'S NAME & MAILING ADDRESS (if any) (street, number, city, state, ZIP code)	ORIGINAL AMOUNT	DATE DEBT INCURRED	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
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<u> </u>					
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		SUBTOTA	L THIS PAGE OF	SCHEDULE E	\$
TOTAL OF ALL PAGES OF SCHEDULE E ON THE LAST PAGE ONLY (Enter total on ITEM 20 of the Summers Sheet)					\$0-